PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004. ursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

180.00

FEE TRANSMIT For FY 2005

Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT

Complete if Known				
Application Number	10/656,684			
Filing Date	September 5, 2003			
First Named Inventor	Jeff Miller			
Examiner Name	TUCKER, PHILIP C.			
Art Unit	1712			
Attorney Docket No.	HAI B:045			

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account D						Karen B. Trip	p, Attorney
For the above-identi	ified deposit a	ccount, the Direct	tor is hereb	y authorized to	o: (check all th	ıat apply)	
✓ Charge fee(s)) indicated bel	low		Char	ne fee(s) indic	rated below, exc	ept for the filing fee
Charge any a	additional fee(s) or underpayme	ents of fee(s		• • •	•	ept for the hims
under 37 CFR	R 1.16 and 1.1	17	,	, La ciedi	it any overpay		
WARNING: Information on this information and authorization	s form may bed on PTO-2038.	come public. Credit	t card inform	nation should n	ot be included	on this form. Pro	ovide credit card
FEE CALCULATION							
1. BASIC FILING, SEAR	PCH AND F	YAMINATION	EEE8				
I. DAGIO FILINO, OLAI.	FILING F		SEARCH	H FFFS	FXAMINA	TION FEES	
Anniication Type	Sr	mall Entity		Small Entity	5	Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEE	ES						Small Entity
Fee Description Each claim over 20 (i	including Re	aiceupe)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25
Each independent claim			100)			200	100
Multiple dependent cl		Heldding Iterson	ies <i>j</i>			360	180
Total Claims	Extra Claim	s Fee (\$)	Fee P	aid (\$)			pendent Claims
20 or HP =		_ x	_=			Fee (\$)	Fee Paid (\$)
HP = highest number of total							
Indep. Claims - 3 or HP =	Extra Claim		Fee Pa	<u>aid (\$)</u>			
HP = highest number of indep	pendent claims	X paid for, if greater th	. = ian 3.				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S)			v	ound up to a .	Miloic Hairibei	,	
Non-English Specific	cation, \$13	30 fee (no small	entity dis	scount)			Fees Paid (\$)

10tal s	100 = /	50 = (round up to a whole nu		<u>Fee (\$)</u>	Fee Paid (\$)	684
4. OTHER Non-E	FEE(S) nglish Specification, \$130 for	· · ·			Fees Paid (\$)	6 10656
Other (e.g., late filing surcharge): <u>Sur</u>	pplemental Information Disclosure Statement			180.00	00
SUBMITTED B	Υ					١Š
Signature	Kon B. I	Registration No. (Attomey/Agent) 30,452	T	elephone ₇₁₃	658 9323	
Name (Print/T	ype) Karen B. Tripp	U	E	ate July 27, 2	2005	E
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031

Date July 28, 2005

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/656,684 **TRANSMITTAL** Filing Date September 5, 2003 First Named Inventor **FORM** Jeff Miller Art Unit 1712 Examiner Name TUCKER, PHILIP C. (to be used for all correspondence after initial filing) Attorney Docket Number

Total Number of Pages in This Submission							
FNCI OSURES (Chack all that apply)							
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement	ENCLOSURES (Check all that apply Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Documents cited in Information Disclosure Statement; Return Receipt Postcard					
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks TUDE OF ARRIVANT ATTORNEY						
	TURE OF APPLICANT, ATTORNEY, C	OR AGENT					
Firm Name Karen B. Tripp, Attorney at Law							
Signature Kan S. Jusi							
Printed name Karen B. Tripp							
Date July 27, 2005	Reg. No.	30,452					
CERTIFICATE OF TRANSMISSION/MAILING							
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AMENA!	e for form 1449/PTO				Complete if Known
HAUE	10 10 10 11 17 10 17			Application Number	10/656,684
INFO	DRMATION	DIS	CLOSURE	Filing Date	September 5, 2003
STA	TEMENT E	BY A	PPLICANT	First Named Inventor	Jeff Miller
	(Use as many she	ote se n	arassan/i	Art Unit	1712
(600 10 11111) 011010 10 11010111				Examiner Name	TUCKER, PHILIP C.
Sheet	1	of	1	Attorney Docket Number	HALB:045

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	ZA	Litigation Documents regarding related U.S. Patent No. 6,887,832 B2, issued May 3, 2005, being filed herewith in accord with MPEP 2001.06(c)	
	_		

Examiner	Date	
Signature	Considered	

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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